## <u>Alternative Professional Preparation Program Approval Procedures</u>

Section A: Profile of the Organization (type and approval being requested)

A-1 Evidence No Clarification Questions and/or Comments **Evidence** (for evaluator use only) What makes your program unique? Provide a program overview. Describe your organization's vision, mission, philosophy, and goals.

A-2 Evidence No Evidence Clarification Questions and/or Comments (for evaluator use only) Describe the organizational governance structure for your organization. Provide an organization chart. A-3

1-3		
Evidence	No	Clarification Questions and/or Comments
	Evidence	(for evaluator use only)
	271401100	(ref evaluater dee erry)
Provide evi	dence that the	e organization has appropriate fiscal resources to sustain a professional preparation
program.		
program.		

Δ\_5

A-3		
Evidence	No	Clarification Questions and/or Comments
	Evidence	(for evaluator use only)
Dravida tha	vyob oddrooo	for your institution. If a passy and is required places provide
Provide the	web address	for your institution. If a password is required, please provide.

## Section B: Demographic data

B-1

D- I		
Evidence	No Evidence	Clarification Questions and/or Comments (for evaluator use only)
Provide car	ndidate demog	graphic data by program:
Numb	er enrolled fo	r the current year, prior year, and projected year
Numb	er who are re	sidents in Arizona
• Ethnic	city	
Gende	er	
Age ra	anges (20-25),	(26-30), (31-40), (40-50), 50+
		(Place candidate demographic data in the appendix.)

3-2		
Evidence	No Evidence	Clarification Questions and/or Comments (for evaluator use only)
<ul><li>Numb</li><li>Ethnic</li><li>Gende</li><li>Numb</li></ul>	er of part-time	
i dodin	iy/oariaidato i	(Place faculty demographic data in the appendix.)

## **Section C: Program Components**

1		
Evidence	No Evidence	Clarification Questions and/or Comments (for evaluator use only)
dentify each	program being subm	nitted for review.

Dravida a program avantiant and philosophy for each program authorities.	
Dravida a pregram aversious and philosophy for each pregram authoritied	
Provide a program overview and philosophy for each program submitted.	

<u>y-0</u>		T
Evidence	No	Clarification Questions and/or Comments
	Evidence	(for evaluator use only)
	271001100	(ref evaluate des emy)
Identify the	special nonu	lation your program serves within Arizona, if applicable.
identify the	special popu	lation your program serves within Anzona, if applicable.
1		

;-4		
Evidence	No	Clarification Questions and/or Comments
	Evidence	(for evaluator use only)
	LVIGOTIOG	(101 ovaluator dos orny)
1.1		I to a construction of the first of the firs
identify crit	teria designed	I to measure a candidate's qualifications for entry into the program. Describe how the
organizatio	on insures that	t candidates meet the requirements to participate in the Alternative Professional
	n Program pat	· · · · · · · · · · · · · · · · · · ·
rieparation	i Program pai	ilway.

J-0		
Evidence	No	Clarification Questions and/or Comments
	Evidence	(for evaluator use only)
	LVIGCIICC	(101 Evaluator use offly)
Submit a co	ourse sequen	ce for each program of study or alternative program of study. Identify the credit or
		each course/module in the program.
Clock Hours	o required for	cach course, module in the program.
1		

C-6 Evidence No **Clarification Questions and/or Comments Evidence** (for evaluator use only) Submit a description of all courses or modules.

Evidence	No Evidence	Clarification Questions and/or Comments (for evaluator use only)
	yllabi or mod courses/mod	lules for each program requested for review. Provide a web link and password to ules.

Evidence	No	Clarification Questions and/or Comments
	Evidence	(for evaluator use only)
Submit offic	ial varifiaatia	an that all condidates have completed the training/correspondly required for the full
		on that all candidates have completed the training/coursework required for the full
Structured E	inglish imme	ersion endorsement.

Evidence	No Evidence	Clarification Questions and/or Comments (for evaluator use only)
	ication that all ele rsework/training.	mentary candidates have completed the required research-based systematic

J-10		
Evidence	No	Clarification Questions and/or Comments
	Evidence	(for evaluator use only)
Submit veri	ification that a	all administration candidates have completed the required training/coursework in
	nce and scho	
School iiia	ilce alla scilo	oi iaw.
		· · · · · · · · · · · · · · · · · · ·

## **Section D: Field Experience and Capstone Experience**

D-1 Clarification Questions and/or Comments **Evidence** No **Evidence** (for evaluator use only) List and define the roles of all stakeholders in required field experience and in the capstone experience. (ex. supervising teacher, principal, organizational supervisor, etc., if applicable)

D-2

Evidence	No	Clarification Questions and/or Comments
	Evidence	(for evaluator use only)
		when of field experience clock become required
identity the	<u>minimum nui</u>	mber of field experience clock hours required.

Evidence	No Evidence	Clarification Questions and/or Comments (for evaluator use only)
Identify the r	minimum nun	mber of clock hours required in the capstone experience.

D-4

D-4		
Evidence	No	Clarification Questions and/or Comments
	Evidence	(for evaluator use only)
		(ioi ovaluatoi uoo oiliy)
Deceribe th		d aritaria valur institution usas far avaluating candidates during their field avecriones
Describe th	ie process and	d criteria your institution uses for evaluating candidates during their field experience.
Submit cop	pies of the eva	lluation instrument.

<u></u>		
Evidence	No	Clarification Questions and/or Comments
	Evidence	(for evaluator use only)
	Lviderice	(for evaluator use offly)
Dogoribo th	o process on	d pritorio volur inotitution upop for evolucting condidates during their constant
		d criteria your institution uses for evaluating candidates during their capstone
experience	/internship. S	Submit copies of the evaluation instrument.
CAPCHICHES		
1		

Evidence	No	Clarification Questions and/or Comments
	Evidence	(for evaluator use only)
Describe the	a intervention	/remediation process your organization uses if the candidate does not satisfactorily
	e field experi	
complete th	e neiu expeni	

D<sub>-</sub>7

J-1		<del>,</del>
Evidence	No	Clarification Questions and/or Comments
	Evidence	(for evaluator use only)
	Lviderice	(for evaluator use ority)
Describe th	a intervention	n/remediation process your organization uses if the candidate does not satisfactorily
complete th	ne capstone e	experience/internship.
	•	<u> </u>

Evidence	No Evidence	Clarification Questions and/or Comments (for evaluator use only)
		the selection of organizational supervisors for candidates participating in the field experience/internship.

D-9

Evidence	No Evidence	Clarification Questions and/or Comments (for evaluator use only)
		training organizational supervisors for candidates participating in the field experience/internship.
experience	and capsione	experience/internatip.

Section E: Description of the assessment plan for measuring student competency in coursework and field experiences in meeting state and national standards

-1		
Evidence	No Evidence	Clarification Questions and/or Comments (for evaluator use only)
		nd verification process your organization uses to assess a candidate's competency ogram (Basic Skills in literacy and numeracy; content knowledge and bachelor's

E-2

Evidence	No Evidence	Clarification Questions and/or Comments (for evaluator use only)
Describe the	e evaluation	and verification process your organization uses to assess a candidate's onal knowledge.
<u>competency</u>	y iii proteccie	mai knowlodgo.

Evidence	No Evidence	Clarification Questions and/or Comments (for evaluator use only)
		he verification process your organization uses to determine a candidate's eligibility onal Recommendation).

E-4

Evidence	No Evidence	Clarification Questions and/or Comments (for evaluator use only)		
Submit the name, title and signature of ONE person in your organization who is responsible for verification and issuance of the Institutional Recommendation.				

Section F: Program Matrix aligning coursework with relevant state and national standards (coursework and field experience). Relevant artifacts/evidence must be used to provide evidence that the state and national standards have been met.

·- <u>1</u>				
Evidence	No	Clarification Questions and/or Comments		
	Evidence	(for evaluator use only)		
Submit a n	rogram matri	x that shows alignment between state and national standards and your program		
objectives, assessments (signature assignments) and field experiences, including the capstone experience.				
Programs must align with state and national standards.				